PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number: 10788486

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	40	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	40 minus 20=	* 20
INDEPENDENT CLAIMS	4 minus 3 =	*1
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero. enter "0" in column 2

SMALL ENTITY TYPE ☐   OR   **OTHER THAN SMALL ENTITY**

	SMALL ENTITY RATE	FEE		OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE		385.00	OR	BASIC FEE	770.00
	X$ 9=		OR	X$18=	360
	X43=		OR	X86=	86
	+145=		OR	+290=	
TOTAL			OR	TOTAL	1216

CLAIMS AS AMENDED - PART II

OTHER THAN SMALL ENTITY   OR   **SMALL ENTITY**

AMENDMENT A — 12/1/06

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	. 36	Minus	** 40	= /
Independent	. 4	Minus	*** 4	= /
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY RATE	ADDITIONAL FEE		OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
X$ 9=		OR	X$18= 50	
X43=		OR	X86= 200	
+145=		OR	+290= 360	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	.	Minus	**	=
Independent	.	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY RATE	ADDITIONAL FEE		OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	.	Minus	**	=
Independent	.	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY RATE	ADDITIONAL FEE		OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 10/03)

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